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SPIKE HOLDINGS AZ, LLC

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

#### **COVER LETTER**

TO:	Registration Section Division of Corporations							
SUBJI	Spike Holdings AZ, L	LC						
		Name of Lin	nited Liability	Company				
The en Exister	closed "Application by Foreignee, and check are submitted t	gn Limited Liability Compan o register the above referenc	y for Authoriz ed foreign lim	zation to Transa nited liability co	ct Business in Florida," mpany to transact busine	Certificate of ess in Florida		
Please	return all correspondence con	cerning this matter to the fol	lowing:					
	Jonathan M. Larm	oore						
	Name of Person							
	Arciterra Companies, LLC							
	<del>\</del>	Firm	Company					
	27001 E. Camelback Rd., Ste. 150							
Address								
	Phoenix, Arizona 85016							
City/State and Zip Code								
	jazmin.villa@arcite	rra.com						
	E-mail address: (to be used for future annual report notification)							
For furt	her information concerning th	nis matter, please call:						
	Jazmin Villa	at	602	840-4648				
	Name of C	ontact Person	Area Code	Daytime	Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301						
	Enclosed is a check for the fi Please make check payable t		NT OF STA	те				
		\$130.00 Filing Fee & Certificate of Status	\$155.00	Filing Fee & ed Copy	\$160.00 Filing Fe of Status & Certifi			

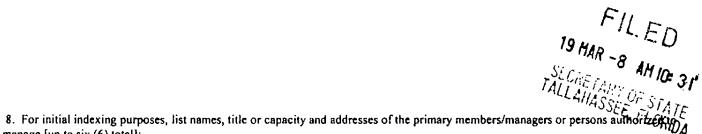
## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Spike Holdings, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC,") Arizona 47-5255583 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 3-11-19 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2701 E. Camelback Rd., Ste. 150 2701 E. Camelback Rd., Ste. 150 (Street Address of Principal Office) (Mailing Address) Phoenix, Arizona 85016 Phoenix, Arizona 85016 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) NRAI Services, Inc. Name: 1200 South Pine Island Road, Broward County Office Address: Plantation

#### Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature



manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Canacity:		Name and Address:
Manager	Name:	☐ Manager	Name:	
■Member	Address: 2701 E. Camelback Rd.Ste 150	☐ Member	Address:	
Authorized	Phoenix, AZ 85016	Authorized		
Person		Person		
Other	Other	Other	<del></del>	Other
Manager	Name:	☐ Manager	Name:	
Member	Address:	☐ Member	Address:	
Authorized		Authorized	· mir	
Person		Person		
Other	Other	Other	_ <del></del> -	Other
Manager	Name:	Manager	Name:	
□Member	Address:	Member	Address:	<del></del> -
☐Authorized		Authorized		
Person		Person		·
Other	Other	Other		Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person Jonathan M. Larmore, Manager

Typed or printed name of signee



# STATE OF ARIZONA



# Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

1, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

#### SPIKE HOLDINGS, LLC

ACC file number: L20375935

was incorporated under the laws of the State of Arizona on 10/01/2015, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. I have hereunto set my hand, affixed the official seal of the Arizonal Corporation Commission, and issued this Certificate on this date: 01/03/2019

Matthew Neubert, Interim Executive Director

